

Living Kidney Donor Information

Living donation takes place when a living person donates a kidney for transplantation to another person. There are currently over 100,000 people awaiting kidney transplants in the United States. Many kidney transplants are made possible from deceased donors, however, the demand greatly surpasses the supply of available kidneys. Although most people are born with two kidneys, only one working kidney is needed to live a normal life. This allows a healthy person the opportunity to donate a kidney to someone with kidney failure.

Advantages of kidney transplant for the recipient:

- Dialysis free life allowing for more freedom in work and social activities.
- Kidneys from living donors usually start to work immediately. Some deceased donor kidneys may not work immediately, because of this the recipient may require dialysis until the kidney starts to work.
- Transplant can take place at a time convenient for donor and recipient.
- May decrease recipient's waiting time for transplant. The waiting list for deceased donor kidneys can be many years. If a living donor is cleared for transplant, surgery can be scheduled within several weeks.
- Kidneys from living donors often work better and last longer than kidneys from deceased donors.
- Studies have shown longer life span of patients after transplant versus staying on dialysis.

Who can Donate?

All potential donors undergo a thorough medical and psychological evaluation by the transplant center. A donor can be any family member or non-blood related person such as a spouse, friend, or acquaintance. Potential donors must be in generally good physical and emotional health, be over 18 years old, and be able to understand the donation process.

Types of Donation

- *Directed donation*: donating a kidney to a known intended recipient.
- *Altruistic Non-Directed Donation*: donating a kidney without any specific recipient in mind. These kidneys are allocated to the Queen's Transplant Center list using the UNOS priority system or as part of a kidney paired-trade donation.

Conditions that may prevent a person from being accepted as a donor:

- Kidney disease
- Diabetes
- Obesity
- History of hepatitis or HIV
- Conditions that prevent competent decision making such as mental illness
- Heart and lung disease
- History of blood clots
- Uncontrolled high blood pressure
- Active, untreated, or advanced cancers
- Heavy smoking history
- Heavy alcohol or active illicit drug use
- Chronic use of non-steroidal anti-inflammatory drugs (NSAID)

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How long is the donor evaluation?

The donor will be assigned to a coordinator who will provide education regarding the donor evaluation process, testing, procedures and surgery, along with donor’s responsibilities before and after donation. The coordinator is the donor’s advocate throughout the donation process and will work with them to ensure all their needs are met. The average donor workup takes 3-6 months and depends highly on the donor’s ability to complete the testing, the availability of diagnostic tests and visits with team and doctors

Donor’s Right to Privacy

We understand that health information is personal. The Queen’s Transplant Center will take all reasonable precautions to provide confidentiality for the donor and the recipient. No donor information will be shared with their intended recipient.

How do donors get started?

Step 1: Initial Interview

Potential donors may call the living donor coordinator at 808-691-1120 to start the process. Potential donors may be asked to complete an online questionnaire to register conveniently and confidentially online at <http://queens.donorscreen.org> . Alternatively, potential donors may fill out our “*living donor intake sheet*” and fax or mail the form directly to the transplant center. The coordinator will ask the donor questions regarding their past medical history. This information will remain confidential. The living donor coordinator will determine if the potential donor is appropriate to continue with evaluation based on the information provided.

Step 2: Determine Compatibility

Potential donor’s next step will be to complete a blood test to find out if their blood type is compatible with their intended recipient. If compatible, donors will continue with evaluation.

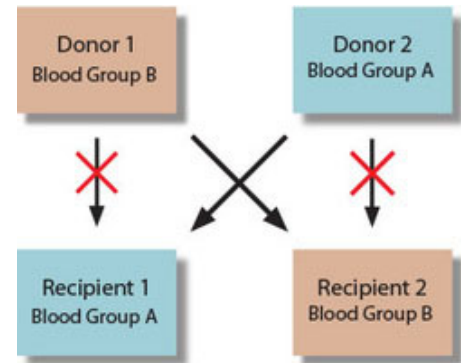
If you have a blood type...	You can normally receive a kidney from a donor with the blood type:	You can normally donate a kidney to a recipient with the blood type:
O	O	O, A, B, AB
A	A, O	A, AB
B	B, O	B, AB
AB	O, A, B, AB	AB

After blood type compatibility is confirmed, tissue typing is completed via blood test called a crossmatch. During a crossmatch the donor’s and recipient’s blood are mixed together and monitored. A “negative” reaction indicates that a transplant with this donor’s kidney will be successful and will have a very low risk of immediate rejection occurring.

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What if the donor is not a match?

If the donor is unable to donate to their intended recipient; the donor-recipient pair may be able to participate in our paired trade donation program. In this option; incompatible donor-recipient pairs exchange their kidneys so that each recipient can receive a compatible kidney.



Step 3: Medical and Psychological Evaluation

The donor will be scheduled for testing to make sure they are suitable for donation. The donor testing includes but is not limited to:

- Blood tests – to determine general health and the presence of specific viruses.
- Urine tests – to determine kidney function by monitoring the amount of creatinine that is cleared from the kidneys
- Electrocardiogram (EKG) – to show how well the heart is beating.
- Chest X-Ray – to identify any problems with the lungs.
- A Computed Tomography Angiography (CTA) of the abdomen and Pelvis – to look at the anatomy of the kidneys.

Females also will require the following tests:

- Pregnancy test via blood test.
- Recent Pap Smear
- Mammogram for females 40 years old or older

If age 50 years or older, you must also complete:

- Colonoscopy or occult stool testing – to rule out any possible colon cancer.
- Echocardiogram: ultrasound of the heart to show the function of the heart valves

Additional testing may be ordered as deemed necessary by the living donor Surgeon or Kidney Specialist.

Potential donors must also be evaluated by members of the transplant multi-disciplinary team including:

- Social Worker – to evaluate donor's ability to cope with the stress of donation, lost time from work, and family dynamics. This interview ensures the donor is comfortable with the decision to donate and has explored all concerns that may apply to donation. Donors must be free of coercion or financial inducement.
- Psychologist – will complete an in-depth psychiatric evaluation and assessment.
- Donor Advocate – this person will act on the donor's behalf to ensure that they have a clear understanding of their rights as a potential donor and provide the opportunity to discuss any concerns or issues related to the evaluation and kidney donation.
- Dietitian – completes a nutritional assessment and will provide education on having a healthy diet.
- Pharmacist – will review any medication the donor may be taking and identify potential side effects.

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- Nephrologist – a kidney specialist will discuss many of the disease processes that can contribute to kidney failure. They will review the donor’s medical history to determine their risks for kidney donation.
- Surgeon – will discuss the appropriateness of kidney donation, based on the information obtained during the donor’s evaluation. The surgeon will also discuss the significance of the donation, the surgical procedure itself, as well as the risks and possible complications after surgery.

Step 4: Scheduling Surgery

If all medical, social, and psychological clearances have been completed; the donor’s evaluation will be presented to the transplant committee for official review. The donor will be notified via letter and phone call if they have been medically and surgically cleared to donate. If cleared; the donor and recipient can work together to schedule a date for surgery that is convenient for both parties.

Surgical Procedure

Surgery for the donor and recipient is normally done on the same day. The operation to remove the healthy kidney from the donor is called a nephrectomy and takes about 2-4 hours to complete. At the Queen’s Medical Center, the donor nephrectomy is done using a minimally invasive technique called a Laparoscopic nephrectomy. Removing the kidney this way results in significantly less pain, a shorter hospital recovery and return to normal life much faster than those have a traditional “open” surgery.

Hospital Stay

After surgery, donors will be taken to a nursing unit where they will be closely monitored. Donors recover in the hospital from surgery for an average of 1 to 2 days. Donors will have pain after surgery. This will be carefully monitored and controlled with medications. Most donors have significant reduction of pain within 2 to 3 days after surgery.

Recovery

After the donor leaves the hospital, they will still be recovering. Although recovery time varies, most donors can resume normal activity one month after surgery and may return to work within four to six weeks.

Follow Up

All transplant hospitals are required to report data on the health status of living donors at 6 months, 1 year, and 2 years after donation. The information gathered helps track donor outcomes. Kidney donors are recommended to have an annual medical follow up with a physician after donation to monitor any changes in blood pressure or kidney function. Maintaining a normal diet, staying well hydrated by drinking water, as well as participating in regular exercise is highly recommended.